

Notice of Privacy Practices

Effective Date: 4/1/2022

This notice describes how your health information may be used and disclosed and how you can access this information. Please review it carefully.

Your Rights

You have the right to:

- Access and obtain a copy of your health records
- Request corrections to your records
- Request confidential communications
- Ask us to limit the information we share
- Get a list of disclosures of your information
- File a complaint if you believe your privacy rights have been violated

Our Responsibilities

We are required by law to:

- Keep your health information private and secure
- Provide you with this notice
- Follow the terms of this notice
- Notify you of a breach involving your information

How We Use and Share Information

We may use or share your information:

- For your treatment (e.g., with other healthcare providers)
- To run our practice (e.g., billing, scheduling, quality improvement)
- To bill and receive payment from your insurance
- When required by law (e.g., public health, law enforcement)
- For health oversight activities and legal proceedings

We will not use or share your information for marketing or sale without your written permission.

Contact Us

If you have questions or would like to exercise your rights, contact:

Smile Orthodontics by Dr. Sarah

Paul Schroetter

631-825-5220

16 Goodfriend Dr. Suite 6

East Hampton, NY 11937

To file a complaint with the U.S. Department of Health and Human Services, visit:

<https://www.hhs.gov/hipaa/filing-a-complaint>

We will not retaliate against you for filing a complaint.